## PART B - FEE(S) TRANSMITTAL nd this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE **Commissioner for Patents** JUL 3 0 5008 P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 INTRUCTIONS of form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where approach the correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated timess corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 021005 04/21/2006 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. HAMILTON, BROOK, SMITH & REYNOLDS, P.C. 530 VIRGINIA ROAD P.O. BOX 9133 CONCORD, MA 01742-9133 Meredith Murray (Depositor's name) 07/21/2006-DEHMANU2-00000070-10661374 (Signature) -1400,00 BP -FC: 1501 200 02 FC+1504 <del>~300.00 0</del>P (Date) FC1800 APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/661,374 09/12/2003 07/21/2006 255641002 00000071 10661374682 James A. Helzer TITLE OF INVENTION: ROTATABLE COIN DISPLAY 1400.00 OP 01 FC:1501 300.00 DP 02 FC:1504 03 FC:8001 45.00 OP APPLN. TYPE SMALL ENTITY **ISSUE FEE PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 07/21/2006 **EXAMINER** ART UNIT **CLASS-SUBCLASS** GEHMAN, BRYON P 3728 206-000800 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Hamilton, Brook, Smith 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 & Reynolds, P.C. ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Unicover Corporation Cheyenne, Wyoming 4b. Payment of Fee(s):

4a. The following fee(s) are enclosed: Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Advance Order - # of Copies \_ Deposit Account Number (enclose an extra copy of this form). 08-0380 5. Change in Entity Status (from status indicated above) ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Typed or printed name Kevin T. Shaughnessy

Registration No.

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